Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
	<u> </u>	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Jean	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Audrey	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Moody	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7996	

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Debtor 1 Jean Audrey Moody Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	111 Wicker Court, Suite 8 Roanoke Rapids, NC 27870 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code
		Halifax County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Cha	pter 11						
		☐ Cha	pter 12						
		■ Cha	pter 13						
8.	How you will pay the fee	а 0	bout how yo	by the entire fee when I file my petition. Please check with the clerk's office in your local court for more do ow you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or my your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check intended to the contract of the contra					
						n, sign and attach the Application for Individuals	to Pay		
			•		(Official Form 103A).	only if you are filing for Chapter 7. By law, a judg	ne mav		
		b a	ut is not rec pplies to yo	uired to, waive y ur family size and	our fee, and may do so only if you d you are unable to pay the fee in	or income is less than 150% of the official poverty installments). If you choose this option, you mus al Form 103B) and file it with your petition.	line that		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	□ No.		ine 12.					
	Toolaonoo I	Yes.	Has yo	our landlord obtai	ined an eviction judgment against	you?			
				No. Go to line 1	2.				
				Yes. Fill out Init	tial Statement About an Eviction .	udgment Against You (Form 101A) and file it with	n this		

Debtor 1 Jean Audrey Moody

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Deb	otor 1 Jean Audrey Mood	ly		Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Propri	ietor
			104 01111 40 4 0010 1 1001	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of b	usiness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	у
	If you have more than one sole proprietorship, use a		Number, Street, City, S	tate & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate I	box to describe your business:
				siness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))
			☐ None of the about	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	is. If you indicate that you arns, cash-flow statement, and S.C. 1116(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Ch	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or			
	livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	3 · · · · · · · · ·			Number, Street, City, State & Zip Code

Debtor 1 Jean Audrey Moody

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Jean Audrey Mood	у		Case number (if known)				
Part	6: Answer These Questi	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.		consumer debts? Consumer ersonal, family, or household pu		n 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.		business debts? Business denvestment or through the operat				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not consumer de	bts or business deb	ots		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	ter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and			7. Do you estimate that after any available to distribute to unsecu		s excluded and administrative expenses		
	administrative expenses		□ No					
	are paid that funds will be available for		☐ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 n □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$500	million 0 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 n □ \$10,000,001 - \$50 □ \$50,000,001 - \$10 □ \$100,000,001 - \$50	million 0 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Part	7: Sign Below							
For	you	If I have of United State If no attor document I request I understate bankrupto and 3571./s/ Jean Jean Aud	hosen to file under Chapte ates Code. I understand the mey represents me and I die, I have obtained and read relief in accordance with the modern making a false statement of the case can result in fines under the code of t	e relief available under each chaid not pay or agree to pay some the notice required by 11 U.S.C e chapter of title 11, United Statent, concealing property, or obtain to \$250,000, or imprisonment Signa	eed, if eligible, under apter, and I choose sone who is not an acc. § 342(b). tes Code, specified wining money or pro	er Chapter 7, 11,12, or 13 of title 11, or to proceed under Chapter 7. attorney to help me fill out this in this petition. perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,		

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Debtor 1Jean Audrey Mood	dy	Ca	se number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United State for which the person is eligible. I also certify that I h	tes Code, and have	explained the relief available under each o	hapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certification is incorrect.			
. 0	/s/ Palmer E. Huffstetler, III	Date	October 18, 2019	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Palmer E. Huffstetler, III 47818			

peh@sosnalaw.com

Email address

Sosna Law Offices, PLLC

Contact phone (252) 937-3027

3031 Zebulon Road Rocky Mount, NC 27804 Number, Street, City, State & ZIP Code

Firm name

47818 NC Bar number & State

				•	
Fill	I in this information to identify your case:				
Deb	btor 1 Jean Audrey Moody				
Deb	First Name N	liddle Name Last Name			
(Spo	ouse if, filing) First Name N	liddle Name Last Name			
Unit	ited States Bankruptcy Court for the: EAST	ERN DISTRICT OF NORTH CAROLINA			
	ise number			Check if amende	this is an d filing
Su		iabilities and Certain Statistical Information			/15
infoi your	ormation. Fill out all of your schedules first;	o married people are filing together, both are equally responsible for then complete the information on this form. If you are filing amend mmary and check the box at the top of this page.			
				Your assovation	ets what you own
1.	Schedule A/B: Property (Official Form 106/ 1a. Copy line 55, Total real estate, from Scho	A/B) edule A/B		\$	120,000.00
	1b. Copy line 62, Total personal property, fro	m Schedule A/B		\$	15,375.00
	1c. Copy line 63, Total of all property on Sch	edule A/B		\$	135,375.00
Par	rt 2: Summarize Your Liabilities				
				Your liab Amount y	
2.	Schedule D: Creditors Who Have Claims Se 2a. Copy the total you listed in Column A, An	cured by Property (Official Form 106D) mount of claim, at the bottom of the last page of Part 1 of Schedule D		\$	193,047.74
3.	Schedule E/F: Creditors Who Have Unsecur 3a. Copy the total claims from Part 1 (priorit	ed Claims (Official Form 106E/F) y unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (nonpr	iority unsecured claims) from line 6j of Schedule E/F		\$	43,037.53
		Your total liabilities	\$_		236,085.27
Par	rt 3: Summarize Your Income and Expens	ses			
4.	Schedule I: Your Income (Official Form 106l) Copy your combined monthly income from li	ne 12 of Schedule I		\$	3,105.75
5.	Schedule J: Your Expenses (Official Form 10 Copy your monthly expenses from line 22c of	06J) f Schedule J		\$	2,849.10
Par	rt 4: Answer These Questions for Admini	strative and Statistical Records			
6.	Are you filing for bankruptcy under Chapt No. You have nothing to report on this p	ters 7, 11, or 13? part of the form. Check this box and submit this form to the court with yo	ur ot	her sche	dules.
7.	■ Yes What kind of debt do you have?				
		ebts. Consumer debts are those "incurred by an individual primarily for). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	а ре	rsonal, fa	nmily, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Jean Audrey Moody Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	n this information	n to identify your ca	ase and this fili	ng:			
Deb	tor 1 Je	ean Audrey Moody	/				
		st Name	Middle Name	Last Name			
	tor 2 se, if filing) Fire	st Name	Middle Name	Last Name			
Jnit	ed States Bankrup	tcy Court for the: E	EASTERN DIST	RICT OF NORTH CAROLINA			
cas	e number	_					Check if this is a
							amended filing
- (400 A /D					
	icial Form		1				
C	nedule <i>P</i>	VB: Prope	erty				12/15
	Yes. Where is the p	roperty?					
.1	6673 Pamoth C	Drive	Wh	nat is the property? Check all that apply			
.1	6673 Ramoth D	Drive able, or other description		Single-family home			s or exemptions. Put aims on <i>Schedule D:</i>
.1					the amount of any s	secured cla	
.1	Street address, if availa	able, or other description]]]	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any s Creditors Who Have Current value of the	secured claims S	aims on Schedule D: Secured by Property.
.1	Street address, if availa	able, or other description	[] [] 0000-8	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any s Creditors Who Have Current value of the entire property?	secured cla e Claims S ne C	aims on Schedule D: Secured by Property. Current value of the portion you own?
.1	Street address, if availa	able, or other description	[Code [Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	secured claims Sine Claims Sin	aims on Schedule D: Secured by Property. Current value of the cortion you own? \$120,000.0
.1	Street address, if availa	able, or other description	[26-0000] P Code [5	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$240,000. Describe the natur (such as fee simple)	ne C p .00 re of your	aims on Schedule D: Secured by Property. Current value of the sortion you own? \$120,000.0
.1	Street address, if availa	able, or other description	[26-0000] P Code [5	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Othas an interest in the property? Check one	Current value of the entire property? \$240,000. Describe the natur (such as fee simplial life estate), if known as fee simplial life estate).	ne C p .00 re of your	aims on Schedule D: Secured by Property. Current value of the sortion you own? \$120,000.0
.1	Street address, if availa	able, or other description	[26-0000] P Code [UMh	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only	Current value of the entire property? \$240,000. Describe the natur (such as fee simple)	ne C p .00 re of your	aims on Schedule D: Secured by Property. Current value of the sortion you own? \$120,000.0
.1	Street address, if availa Jacksonville City	able, or other description	[P6-0000 [P Code [F Code F Cod	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only Debtor 2 only	Current value of the entire property? \$240,000. Describe the natur (such as fee simple a life estate), if known fee simple	secured cle e Claims S ne Cp p.000 re of your le, tenancown.	aims on Schedule D: Secured by Property. Current value of the cortion you own? \$120,000.0 Townership interest by by the entireties, compared to the cortion of the cortio
.1	Jacksonville City Duval	able, or other description	[PG-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only Debtor 2 only	Current value of the entire property? \$240,000. Describe the natur (such as fee simplial life estate), if known as fee simplial life estate).	ne Cpp	aims on Schedule D: Secured by Property. Current value of the cortion you own? \$120,000.0 Townership interest by by the entireties, compared to the cortion of the cortio
.1	Jacksonville City Duval	able, or other description	CO000 C C C C C C C C C	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other to has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$240,000. Describe the natur (such as fee simple a life estate), if knot Fee simple	ne Cpp	aims on Schedule D: Secured by Property. Current value of the cortion you own? \$120,000.0 Townership interest by by the entireties, of
1.1	Jacksonville City Duval	able, or other description	CO000 C C C C C C C C C	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another her information you wish to add about this ite	Current value of the entire property? \$240,000. Describe the natur (such as fee simple a life estate), if knot Fee simple	ne Cpp	aims on Schedule D: Secured by Property. Current value of the cortion you own? \$120,000.0 Townership interest by by the entireties, co

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt	tor 1 <u>Jean Audre</u>	ey Moody		Case number (if known)			
3. C a	ars, vans, trucks, tra	actors, sport utility ve	ehicles, motorcycles				
	No						
_	Yes						
_	162						
3.1	_{Make:} Honda		Who has an interest in the property? Check one		Do not deduct secured claims or exemptions. Put		
	Model: Accord		■ Debtor 1 only		ured claims on Schedule D: laims Secured by Property.		
	Year: 2016		Debtor 2 only	Current value of the	Current value of the		
	Approximate mileage	37,230	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other information: Sedan 4D LX I4		At least one of the debtors and another				
	Sedan 4D LX 14		Check if this is community property (see instructions)	\$12,475.00	\$12,475.00		
Ex			nd other recreational vehicles, other vehicles, a atercraft, fishing vessels, snowmobiles, motorcycle				
			n for all of your entries from Part 2, including a that number here		\$12,475.00		
		sonal and Household It y legal or equitable in	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
E	ousehold goods and examples: Major appli I No I Yes. Describe	Household good	ls and furnishings, including bedroom furnitur		¢4 000 00		
		room furniture, p	personal effects, kitchen furniture and applian	nces	\$1,000.00		
E		s and radios; audio, vid ell phones, cameras, r Miscellaneous e		ters, scanners; music collec	ctions; electronic devices		
		IMISCENATIONS E	ICOLI OI IICO		φυσυ.συ		
E	other collection of the collec	ctions, memorabilia, co	prints, or other artwork; books, pictures, or other a bllectibles	art objects; stamp, coin, or t	paseball card collections;		
E	quipment for sports ixamples: Sports, pho musical ins No I Yes. Describe	otographic, exercise, a	nd other hobby equipment; bicycles, pool tables, g	olf clubs, skis; canoes and	kayaks; carpentry tools;		
10. F	Firearms	iles, shotguns, ammun	ition, and related equipment				
	No 1064/B		Cohodula A/D. Dana arts				
Officia	al Form 106A/B		Schedule A/B: Property		page 2		

Case 19-0482	9-5-JNC	Doc 1	Filed 10/18/19	Entered 10/1	18/19 10:49:51	Page 12 of 53
Debtor 1Jean Audrey	Moody			C	ase number (if known)	
☐ Yes. Describe						
11. Clothes Examples: Everyday clo □ No ■ Yes. Describe	othes, furs, lea	ther coats, de	esigner wear, shoes, ac	cessories		
	Clothing					\$500.00
12. Jewelry Examples: Everyday jev □ No ■ Yes. Describe	welry, costume	jewelry, eng	agement rings, wedding	g rings, heirloom jew	relry, watches, gems, q	gold, silver
	Jewelry					\$100.00
■ No □ Yes. Describe 14. Any other personal and ■ No □ Yes. Give specific info	ormation	entries from		entries for pages yo		\$2,100.00
Part 4: Describe Your Finance Do you own or have any le		ble interest i	in any of the following	?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money you h ■ No □ Yes					hen you file your petiti	on
institutions.			counts; certificates of d		dit unions, brokerage	houses, and other similar
□ No ■ Yes			Institution nam	e:		
	17.1. Che	ecking	Suntrust Ban	ık		\$800.00
18. Bonds, mutual funds,	or nublicly tra	ded stocks				

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

page 3 Official Form 106A/B Schedule A/B: Property

No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

		-	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit	t, homeowner's, or renter's insural	nce
- 1	No		
ı	☐ Yes. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance pol someone has died.	icy, or are currently entitled to rec	eive property because
- 1	No		
ı	☐ Yes. Give specific information		
	Claims against third parties, whether or not you have filed a lawsuit or made a Examples: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment	
ı	☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including countered	laims of the debtor and rights to	set off claims
_	■ No		
	☐ Yes. Describe each claim		
	Any financial assets you did not already list		
	■ No		
	☐ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including any entries f for Part 4. Write that number here	. • •	\$800.00
Par	t 5: Describe Any Business-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.	
37.	Do you own or have any legal or equitable interest in any business-related property?		
	No. Go to Part 6.		
	Yes. Go to line 38.		
Par	t 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	Interest In.	
46.	Do you own or have any legal or equitable interest in any farm- or commercial	I fishing-related property?	
	No. Go to Part 7.		
	☐ Yes. Go to line 47.		
Par	T7: Describe All Property You Own or Have an Interest in That You Did Not List Ab	ove	
-	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership		
	No The state of th		
	☐ Yes. Give specific information		
54.	Add the dollar value of all of your entries from Part 7. Write that number here	e	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1 Jean Audrey Moody	Case	number (if known)
Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2		\$120,000.00
56. Part 2: Total vehicles, line 5	\$12,475.00	
57. Part 3: Total personal and household items, line 15	\$2,100.00	
58. Part 4: Total financial assets, line 36	\$800.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+\$0.00_	
62. Total personal property. Add lines 56 through 61	\$15,375.00 Copy p	ersonal property total \$15,375.00
63. Total of all property on Schedule A/B . Add line 55 + line 62		\$135,375.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Jean Audrey Mood	dy		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemption	s are you claiming?	? Check one only.	even if your s	spouse is filing with	า vou

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
6673 Ramoth Drive Jacksonville, FL 32226 Duval County	\$120,000.00	-	\$13,900.00	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2016 Honda Accord 37,230 miles Sedan 4D LX I4	\$12,475.00		\$4,000.00	11 U.S.C. § 522(d)(2)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Household goods and furnishings, including bedroom furniture, living room	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)	
furniture, personal effects, kitchen furniture and appliances Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
Miscellaneous electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)	
Line Holli Schedule PVD. 1.1			100% of fair market value, up to any applicable statutory limit		
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)	
Line Hom Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		

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Deptor	Jean Audrey Moody		Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own			
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	welry ne from <i>Schedule A/B</i> : 12.1	\$100.00	\$100.00	11 U.S.C. § 522(d)(4)	
	io nom concedio / v.b. 12.1		☐ 100% of fair market value, up to any applicable statutory limit		
	necking: Suntrust Bank	\$800.00	\$800.00	42 U.S.C. § 407	
LII	le IIOIII <i>Schedule AVB</i> . 17.1		☐ 100% of fair market value, up to any applicable statutory limit		
	e you claiming a homestead exemption ubject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca		,	

Fill in this inforn	nation to identify you	ır case:			
Debtor 1	Jean Audrey Mod	ody			
Debter 1	First Name	Middle Name Last Name		-	
Debtor 2				_	
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLI	NA	_	
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Forn	n 106D				
		Who House Claims Cooling	al by Duanant		4044
Schedule	D: Creditors	Who Have Claims Secure	ed by Propert	<u>y</u>	12/15
		If two married people are filing together, both are e out, number the entries, and attach it to this form.			
number (if known).		out, number the entires, and attach it to this form.	On the top of any addition	niai pages, write your na	ine and case
1. Do any creditors	have claims secured by	your property?			
□ No. Check	this box and submit the	his form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes. Fill in	all of the information I	below.			
Part 1: List A	II Secured Claims				
		more than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
/ ₋	nking & Trust	Describe the property that secures the claim:	\$185,000.00	\$240,000.00	\$0.00
Creditor's Name	<u> </u>	6673 Ramoth Drive Jacksonville, FL			
		32226 Duval County			
	Chad Fluno	As of the date you file, the claim is: Check all that			
P.O. Box 1	-	apply.			
	C 27894-1847	Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated			
Who owes the de	ebt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only		■ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)	ecurea		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	he debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cl		Other (including a right to offset)			
community de	ebt				
Date debt was inc	urred	Last 4 digits of account number			
2.2 Honda Fin	ancial	Describe the property that secures the claim:	\$8,047.74	\$12,475.00	\$0.00
Creditor's Name		2016 Honda Accord 37,230 miles			
		Sedan 4D LX I4			
PO Box 10	027	As of the date you file, the claim is: Check all that			
Alpharetta	, GA 30009-1027	apply. ☐ Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and De		☐ Statutory lien (such as tax lien, mechanic's lien)			
	he debtors and another	☐ Judgment lien from a lawsuit	hiolo titlo		
☐ Check if this cl community de		Other (including a right to offset)	ernicie title		
Date debt was inc	urred	Last 4 digits of account number 5080	<u> </u>		

Official Form 106D

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Debtor 1	Jean Audrey Moo	dy		Case numbe	r (if known)		
	First Name	Middle Name	Last Name				Ξ
Add the	dollar value of your en	tries in Column A on this pag	ge. Write that number here:		\$193,047.7	74	
If this is the last page of your form, add the dollar value totals from all pages.					\$193.047.7	7.4	
Write tha	at number here:				ψ195,041.1	-4	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

	00.00 =	0.020 0 0.10				-0,-0,-0 -0		ugo .		
Fill	in this inform	nation to identify your c	ase:							
Del	btor 1	Jean Audrey Moody	ı							
		First Name	Middle Na	ıme	Last Name					
	btor 2									
(Spo	ouse if, filing)	First Name	Middle Na	ime	Last Name					
Uni	ited States Bar	kruptcy Court for the:	EASTERN D	ISTRICT OF N	NORTH CAROLINA					
Cas	se number									
(if kn	nown)			-				Check	if this is ar	า
								amende	ed filing	
∩ff	ficial Form	106E/E								
		/F: Creditors WI	ho Have	Hneacur	ad Claime				12/1	5
		accurate as possible. Use				or oroditors with NON	IDDIODITY of	laima Lie		-
Sche eft.	edule D: Credito	ory Contracts and Unexpir ors Who Have Claims Secu tinuation Page to this page other (if known).	red by Propert	y. If more space	e is needed, copy the Par	t you need, fill it out,	number the	entries in	the boxes	on the
Par	rt 1: List All	of Your PRIORITY Uns	secured Clair	ns						
1.	Do any credito	rs have priority unsecured	claims agains	t you?						
	☐ No. Go to Pa	art 2.								
	Yes.									
2.	identify what typ possible, list the	priority unsecured claims. e of claim it is. If a claim has claims in alphabetical order han one creditor holds a part	s both priority ar according to the	nd nonpriority am ne creditor's nam	nounts, list that claim here a ne. If you have more than to	and show both priority a	and nonpriorit	y amount	s. As much	as
	(For an explana	tion of each type of claim, se	ee the instructio	ns for this form in	n the instruction booklet.)					
						Total claim	Priority amount		Nonpriori amount	ty
2.1	Internal F	Revenue Service	La	st 4 digits of ac	count number	\$0.00		\$0.00		\$0.00
	,	editor's Name				<u>.</u>				
	PO Box		W	nen was the deb	bt incurred?		-			
		ohia, PA 19101-7346 reet City State Zip Code	As	of the date you	u file, the claim is: Check	all that apply				
	Who incurred	the debt? Check one.		Contingent	·	,				
	Debtor 1 or	nly		Unliquidated						
	Debtor 2 or	nly		Disputed						
	Debtor 1 ar	nd Debtor 2 only	Ту	pe of PRIORITY	unsecured claim:					
	_	e of the debtors and another	. 🗆	Domestic suppo	ort obligations					
	_	nis claim is for a communi	_	Taxes and certa	ain other debts you owe the	e government				
		ubject to offset?	_		h or personal injury while y	•				
	■ No			Other. Specify						
	☐ Yes				Notice only					

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Debt	tor 1 Jean Audrey Moody	Case number (if known)					
2.2	North Carolina Dept. of Revenue Priority Creditor's Name Bankruptcy Section PO Box 1168 Policiph NC 37640 1168	Last 4 digits of account number\$0.00	\$0.00 \$0.00				
	Raleigh, NC 27640-1168 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
	\square At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Notice only					
4. L u th	insecured claim, list the creditor separately for each claim	alphabetical order of the creditor who holds each claim. If a creditor has more the aim. For each claim listed, identify what type of claim it is. Do not list claims already increditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more				
4.1	Bank of America Nonpriority Creditor's Name PO Box 851001 Dallas, TX 75285-1001 Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number 7155 When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$16,277.43 -				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Credit card purchases	_				

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Debtor 1 Jean Audrey Moody		Case number (if known)			
4.2	Belk Nonpriority Creditor's Name	Last 4 digits of account number 3964	\$1,835.93		
	PO Box 530940 Atlanta, GA 30353-9041	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	□ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Credit card purchases			
4.3	Cardmember Services	Last 4 digits of account number 6582	\$998.60		
	Nonpriority Creditor's Name PO Box 791278	When was the debt incurred?			
	Baltimore, MD 21279-1278				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Credit card purchases			
4.4	First Citizens Bank & Trust Comany	Last 4 digits of account number 8455	\$8,581.85		
4.4	Nonpriority Creditor's Name 100 East Tryon Road	When was the debt incurred?	ΨΟ,301.03		
	Raleigh, NC 27603				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit card purchases			
		— Outer, Specify			

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Debtor	1 Jean Audrey Moody	Case number (if known)	
4.5	Halifax County EMS Nonpriority Creditor's Name	Last 4 digits of account number 3010	\$265.00
	PO Box 2425	When was the debt incurred?	
	Rocky Mount, NC 27802 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.6	Online Information Services, Inc. Nonpriority Creditor's Name	Last 4 digits of account number1654	\$698.98
	PO Box 1489	When was the debt incurred?	
	Winterville, NC 28590		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical bill	
4.7	Optimum Outcomes, Inc.	Last 4 digits of account number 6728	\$1,025.00
	Nonpriority Creditor's Name PO Box 58015	When was the debt incurred?	
	Raleigh, NC 27658	As of the data was file the alaim is OU . I . II the	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	_	Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Medical bill	

Debto	or 1 Jean Audrey Moody	Case number (if known)						
4.8	Pitt County Memorial Hospital	Last 4 digits of account number	\$5,555.44					
	Nonpriority Creditor's Name P. O. Box 8447 Greenville, NC 27835	When was the debt incurred?						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical bill						
4.9	Suntrust Bank	Last 4 digits of account number 9457	\$4,560.18					
	Nonpriority Creditor's Name PO Box 791144	When was the debt incurred?						
	Baltimore, MD 21279-1144	When was the dest incurred:						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	■ No □ Yes	Other. Specify Personal loan						
		— Guior. Opening						
4.1 0	Talbots	Last 4 digits of account number 1361	\$224.30					
	Nonpriority Creditor's Name One Talbot Drive Hingham, MA 02043	When was the debt incurred?						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not						
		report as priority claims Debts to pension or profit-sharing plans, and other similar debts						
	■ No							
	☐ Yes	■ Other. Specify Charge Account						

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Debte	or 1 Jean Audrey Moody	Case number (if known)	
4.1 1	UF Health Jacksonville Hospital	Last 4 digits of account number 6191	\$1,100.00
	Nonpriority Creditor's Name PO Box 830270	When was the debt incurred?	
	Birmingham, AL 35283-0270 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The state year may also states of street apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.1	UF Health Jacksonville Hospital	Last 4 digits of account number 6191	\$1,580.00
2	Nonpriority Creditor's Name		4.,000.00
	PO Box 830270	When was the debt incurred?	
	Birmingham, AL 35283-0270 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The state year may and status of chook all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.1	VCU Health	Last 4 digits of account number 4485	\$100.00
3	Nonpriority Creditor's Name		Ψ100.00
	PO Box 758721	When was the debt incurred?	
	Baltimore, MD 21275-8721 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical bill	
		· · ·	

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	Case number (if known)	
Last 4 digits of account number	3921	\$234.82
When was the debt incurred? As of the date you file, the claim	is: Check all that apply	
Student loans Obligations arising out of a sep report as priority claims Debts to pension or profit-shari	aration agreement or divorce that you did not ng plans, and other similar debts	
t That You Already Listed		
pout your bankruptcy, for a debt that neone else, list the original creditor i	n Parts 1 or 2, then list the collection agency here.	Similarly, if you
ine 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Medical bill t That You Already Listed bootty your bankruptcy, for a debt that you listed in Parts 1 or 2, list the add submit this page. On which entry in Part 1 or Part 2 did you ine 4.8 of (Check one):	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill t That You Already Listed cout your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a neone else, list the original creditor in Parts 1 or 2, then list the collection agency here. you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? ine 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims				·	_
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	43,037.53
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	43,037.53

Fill in this infor	mation to identify your	case:		
Debtor 1	Jean Audrey Mood	dy		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NORTH CAROLINA	
Case number				
(if known)				Check if this i

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease ^o Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	•				
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this	information to identify you	r case:			
Debtor 1	Jean Audrey Mod	ody			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA		
Case numl	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		dobtoro			
Sched	lule H: Your Cod	deptors			12/15
ill it out, a		e boxes on the left. Attach	the Additional Page t		needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes	3				
Arizon No.	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. b. Did your spouse, former spo	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		y states and territories include
in line Form out Co	2 again as a codebtor only 106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor	if that person is a guaran al Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the DGG). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
1	Name, Number, Street, City, State and	ZIP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	е
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	
_	Number Street			_	
	City	State	ZIP Code		
				Под и в	
3.2	Name			Schedule D, lin	
				☐ Schedule E/F, I☐ Schedule G, lin	
_				— Scriedule G, IIII	
	Number Street City	State	ZIP Code		
	Oity	State	ZII COUE		

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Fill	in this information to identify your c	ase:								
Del	otor 1 Jean Audrey	Moody			_					
1 -	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NORTH CAROLI	NA	_					
	se number		-			Check	if this is:			
(If kr	nown)					_	amende	J		
									ng postpetition ollowing date:	•
0	fficial Form 106I					M	M / DD/ Y	/YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing wi	ith you, do not includ	de infori	natio	n about	your spo	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one job,	Employment status	☐ Employed				☐ Employed			
	attach a separate page with information about additional		■ Not employed				☐ Not employed			
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Pai	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any I	ine, write	\$0 in the	space. In	clude your nor	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	emplo	yers for t	hat perso	on on the li	ines below. If y	ou need
						For Deb	tor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Jean Audrey Moody		Case	number (if known)			
	Con	ny line 4 hore	4	For	Debtor 1	non-	Debtor 2 or filing spouse	
	Cop	by line 4 here	4.	Φ_	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$ _	0.00	\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$_ \$	0.00	\$	N/A N/A	
	5f.	Domestic support obligations	5f.	\$ -	0.00	\$ 	N/A	
	5g.	Union dues	5g.	\$-	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	· · ·		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
	٠.	monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	1,431.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	924.75	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	+ \$_	0.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,355.75	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,355.75 + \$_		N/A = \$	2,355.75
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: Contributions from son who lives in Florida	deper		•		chedule J. 11. +\$	750.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$	3,105.75
13.	Do	you expect an increase or decrease within the year after you file this form	?				Combine monthly	
		No.						
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

	in this informa	ition to identify yo	our case:						
Deb	tor 1	Jean Audrey	Moody			Ch	eck if th	is is:	
Dob	tor 2							nended filing	
	ouse, if filing)								ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF NORTH	CAROLINA		MM /	DD / YYYY	
		.,.,			_				
	e number nown)								
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your	Exper	ises					12/15
info	ormation. If m mber (if know		eded, atta ry questio	If two married people are ch another sheet to this in.					
1.	Is this a joir		illolu						
	■ No. Go to	o line 2. es Debtor 2 live i	in a separ	ate household?					
	□ N								
	☐ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		De ag	ependent's ge	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.							Yes
									□ No
					-				☐ Yes ☐ No
									☐ Yes
									□ No
									□ Yes
3.		oenses include	_	No					
		f people other t d your depende	han $_{m \Box}$	Yes					
Est exp app	imate your ex enses as of a blicable date.	a date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	lemental <i>Schedule</i>				
the		h assistance an		government assistance it cluded it on <i>Schedule I:</i> Y				Your expe	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	4.	\$		2,055.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		rty, homeowner's				4b.	: —		0.00
			•	ipkeep expenses		4c.	: —		0.00
5.		owner's associat		dominium dues o ur residence, such as hoi	me equity loans	4d. 5.	·		0.00
٠.	aaondi i	gage payiii			no oquity louris	٥.	Ψ		0.00

Debtor 1	Jean Audrey Moody	Case numb	oer (if known)	
-	ities:	60	¢	0.00
6a.	Electricity, heat, natural gas	6a. 6b.	·	0.00
6b.	Water, sewer, garbage collection		:	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	:	50.09
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies		\$	100.00
	Idcare and children's education costs		\$	0.00
	thing, laundry, and dry cleaning	9.	·	40.00
	sonal care products and services	10.	·	20.00
	lical and dental expenses	11.	\$	225.00
	nsportation. Include gas, maintenance, bus or train fare.	12	¢	75.00
	not include car payments.	12.	·	
	ertainment, clubs, recreation, newspapers, magazines, and books		\$	0.00
	ritable contributions and religious donations	14.	\$	25.00
15. Ins				
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	¢	0.00
		15a. 15b.	·	0.00
	. Health insurance		*	0.00
	. Vehicle insurance	15c.	·	259.01
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	Φ	0.00
	cify:	16.	a	0.00
	allment or lease payments: Car payments for Vehicle 1	17a.	¢	0.00
	. Car payments for Vehicle 2	17a. 17b.	*	
	· ·	17b. 17c.	·	0.00
	Other Specify:		·	0.00
	Other. Specify:	17d.	>	0.00
	Ir payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.	10.	\$	0.00
	cify:	19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i>		ur Income	
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20a.	·	0.00
		206.	·	
21. Oti	er: Specify:	— ^{21.} _г	+\$	0.00
22. Ca l	culate your monthly expenses			
	. Add lines 4 through 21.		\$	2.849.10
22t	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,849.10
220	. Add the 22d and 22b. The result is your monthly expenses.		Ψ	2,849.10
23. Ca l	culate your monthly net income.	_		
238	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,105.75
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	2,849.10
		Г		
230	. Subtract your monthly expenses from your monthly income.		•	250.05
	The result is your monthly net income.	23c.	\$	256.65
o., -				
	you expect an increase or decrease in your expenses within the year after you			or degrees because of a
	example, do you expect to finish paying for your car loan within the year or do you expect your n ification to the terms of your mortgage?	nortgage p	ayıneni io increase (n decrease because of a
	, , , , , , , , , , , , , , , , , , , ,			

Fill in this inf	armatian to identify your				
	ormation to identify your				
Debtor 1	Jean Audrey Mood	Middle Name	Last Name		
Debtor 2	riiotranio	Widdle Hame	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT (OF NORTH CAROLINA		
Case number					
(if known)				_	heck if this is an
				ar	nended filing
Official Fo	orm 106Dec				
	ation About a	n Individua	l Debtor's Sc	hadulas	40/45
Deciai	ation About a	iii iiiuiviuua	Deploi 3 30	liedules	12/15
ears, or both	ney or property by fraud ii . 18 U.S.C. §§ 152, 1341, 1 sign Below		ikruptcy case can result ii	n fines up to \$250,000, or imprisc	onment for up to 20
Did you	pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
■ No					
— П Уас	. Name of person			Attach Bankruptcy Petition	on Prenarer's Motice
				Declaration, and Signatu	•
	nalty of perjury, I declare are true and correct.	that I have read the sun	nmary and schedules filed	d with this declaration and	
X /e/ l4	ean Audrey Moody		X		
	Audrey Moody		Signature of	Debtor 2	
	ature of Debtor 1		- J		
Date	October 18, 2019		Date		
	23(050) 10, 2010				

Debtor		Jean Audrey Moody				
Debtor	First Name	Middle Name	Last Name			
(Spouse	<u> </u>	Middle Name	Last Name			
United	States Bankruptcy Court for the:	EASTERN DISTRICT OF NO	ORTH CAROLINA			
Case r	number			☐ Check if this is an amended filing		
State Be as o	complete and accurate as poss	ible. If two married people are	als Filing for Bankruptcy filing together, both are equally responsi form. On the top of any additional page			
umbe	r (if known). Answer every que	stion.				
Part 1	Give Details About Your M	arital Status and Where You Li	ved Before			
	Give Details About Your M hat is your current marital stat		ved Before			
			ved Before			
. w □	hat is your current marital stat	us?				
. w □	hat is your current marital state Married Not married uring the last 3 years, have you	us?				
. w	hat is your current marital state Married Not married uring the last 3 years, have you	us?	ere you live now?			
. Du	hat is your current marital state Married Not married uring the last 3 years, have you	us? lived anywhere other than wh	ere you live now?	Dates Debtor 2 lived there		
. W	hat is your current marital state Married Not married uring the last 3 years, have you No Yes. List all of the places you	lived anywhere other than wh lived in the last 3 years. Do not in	clude where you live now. Debtor 2 Prior Address: Same as Debtor 1			

Del	otor 1	Jea	an Audrey N	Лооdy		Cas	e number (if known)	
		_						
Par	t 2	Ехр	lain the Sou	rces of You	r Income			
4.	Fill in	the tuare f	otal amount o	of income yo ase and you	u received from all jobs an	ting a business during this yed all businesses, including part eive together, list it only once ur	-time activities.	endar years?
		Yes.	Fill in the det	ails.				
					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Include and de winni	de indother ings. I each s	come regardle oublic benefit f you are filin	ess of wheth t payments; g a joint cas e gross inco	er that income is taxable. E pensions; rental income; in e and you have income tha	wo previous calendar years? Examples of other income are a terest; dividends; money collect at you received together, list it carately. Do not include income to	limony; child support; Social ted from lawsuits; royalties; only once under Debtor 1.	
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
			1 of curren		Social Security	\$14,310.00		
					Retirement Income	\$9,240.00		
			dar year: December 3	1, 2018)	Social Security	\$17,172.00		
					Retirement Income	\$12,000.00		
			dar year befo December 3		Social Security	\$17,172.00		
					Retirement Income	\$12,000.00		
Par	t 3:	l iet	Certain Pay	mente Vou	Made Before You Filed fo	or Bankruntev		
6.	 No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? No. Go to line 7. 							101(8) as "incurred by an
			☐ Yes	paid that cre not include	editor. Do not include paym payments to an attorney fo	paid a total of \$6,825* or more in the nents for domestic support oblig for this bankruptcy case. The part of the cases filed on	ations, such as child suppor	t and alimony. Also, do

Official Form 107

Describe the Property

Explain what happened

Yes. Fill in the information below.

Creditor Name and Address

Value of the

property

Date

Case 19-04829-5-JNC Doc 1 Filed 10/18/19 Entered 10/18/19 10:49:51 Page 37 of 53 Debtor 1 Jean Audrey Moody Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You \$680.00 Palmer E. Huffstetler, III \$345.00 attorney's fees; \$335.00 costs September

Official Form 107

Sosna Law Offices, PLLC

3031 Zebulon Rd. Rocky Mount, NC 27804 peh@sosnalaw.com Ron Thigpen 2019

Debtor 1	Jean Audrey	Mood
Debioi i	Jean Audrey	IVIOOG

Case number (if known)

 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 			ty to anyone who			
	Person Who Was Paid Address	Description and va transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list No Yes. Fill in the details. Person Who Received Transfer	ness or financial affa as security (such as the	irs? ne granting of a s	security intere		
	Address Person's relationship to you	property transferre			s received or debts	made
9.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details.		property to a s	self-settled tr	ust or similar device o	of which you are a
	Name of trust	Description and va	alue of the prop	erty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and Sto	rage Units		
	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associat No Yes. Fill in the details.	ther financial accoun	ts; certificates	of deposit; s		
	Name of Financial Institution and La	ast 4 digits of count number	Type of accou instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, an	y safe depos	it box or other deposit	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or p ■ No □ Yes. Fill in the details.	lace other than your	home within 1 y	ear before y	ou filed for bankruptc	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?

Debtor 1 Jean Audrey Moody

Case number (if known)

Par	9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty yo	ou borrowed from, are storing fo	r, or hold in trust
	■ No				
	Yes. Fill in the details.	Mhara ia tha mramartu?	Dos	noviho the property	Value
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	value
Par	: 10: Give Details About Environmental Inform	ation			
For	he purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	nir, land, soil, surface water, groun			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s was	ste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	y occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e und	er or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site	Governmental unit		Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State an ZIP Code)		know it	Date of Helios
26.	Have you been a party in any judicial or admini	strative proceeding under any env	rironn	nental law? Include settlements	and orders.
	■ No				
	Yes. Fill in the details. Case Title	Court or agency	Nat	ure of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	IVat	ure of the case	case
Par	11: Give Details About Your Business or Cor	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of	the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, eithe	er full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (L	LP)	
	☐ A partner in a partnership		- •		
	☐ An officer, director, or managing execu	tive of a corporation			
	☐ An owner of at least 5% of the voting or	•	1		

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De	btor 1 _Jean Audrey Moody	Ca	ase number (if known)
	■ No. None of the above applies. Go to	Port 12	
	_	I in the details below for each business.	
	,		
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No		
	☐ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pa	rt 12: Sign Below		
are with		a false statement, concealing property, or c	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both.
/9/	Jean Audrey Moody		
Je	an Audrey Moody gnature of Debtor 1	Signature of Debtor 2	
Da	te October 18, 2019	Date	
Did		ent of Financial Affairs for Individuals Filir	ng for Bankruptcy (Official Form 107)?
Did ■ 1	you pay or agree to pay someone who is no	ot an attorney to help you fill out bankrupto	y forms?
		uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	Jean Audrey Moody				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: Eastern District of North Carolina					
Case number (if known)					

Calculate Your Average Monthly Income

Check	Check as directed in lines 17 and 21:				
	According to the calculations required by this Statement:				
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

 $\hfill\square$ Check if this is an amended filing

Official Form 122C-1

Part 1:

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

1. What is your marital and filing status? Check one only.						
■ Not married. Fill out Column A, lines 2-11.						
☐ Married. Fill out both Columns A and B, lines 2-11.						
Fill in the average monthly income that you received from a 101(10A). For example, if you are filing on September 15, the 6 the 6 months, add the income for all 6 months and divide the to spouses own the same rental property, put the income from that	-month period would tal by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh August 31. If the a de any income amount	mount of your monthly income varied during more than once. For example, if both		
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
Your gross wages, salary, tips, bonuses, overtim payroll deductions).	e, and commission	ons (before all	\$0.00	\$		
Alimony and maintenance payments. Do not include Column B is filled in.	de payments from	a spouse if	\$	\$		
4. All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a sport you listed on line 3.	rt. Include regula old, your depende	contributions nts, parents,	\$1,500.00	\$		
5. Net income from operating a business, profession, or farm	Debtor 1					
Gross receipts (before all deductions)	\$0.00					
Ordinary and necessary operating expenses	-\$ 0.00					
Net monthly income from a business, profession, or f	arm \$ 0.00	Copy here ->	\$ 0.00	\$		

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1

\$

-\$

\$

0.00

0.00

0.00 Copy here -> \$

0.00

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

7. Interest, dividends, and royalties 8. Unemployment compensation 9. The amount of you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 For your your your your your your your yo	Debtor 1	Jean Audrey Moody		_	Case numb	er (<i>if known</i>)			
Numeric Autoenda, and royalities Summitted Numeric Summitted Summi							Debtor 2	or	
B. Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it heire: For your \$ 0.00 For your spouse \$ 0.00 For your spouse \$ 0.00 For your spouse \$ 0.00 Proving the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combet held that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combet held in the pay of the except that it does not acceed the amount of retired pay for which that you would otherwise the entitled if the pay of the except that it does not acceed the amount of retired pay for which the tap yon for the except that it does not acceed the amount of retired pay for which the pay had not be extent that it does not acceed the amount of retired pay for which the source and except of the international pay provided on the to Other than despite of the thind except of the except that it does not acceed the amount of retired pay for which you would otherwise the entitled in the pay of the pay that the connection with a disability, or allowance paid by the United States Government in connection with a disability, conflorate related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Sources on a separate page and put the total below. Sources on a separate pay and pay the total below. Sources on a separate pay and pay the total below. Sources on a separate pay and pay the total below. Sources on a separate pay and pay the total for Column A to the total for Column B. You are not married. Hill in O below. You are not married. Hill in O below. Fill in the amount of the income listed in line 11, Column B, that wa	7. Int	erest, dividends, and royalties			\$	0.00	\$		
the Social Security Act. Insisad, list it here: For you spouse \$ 0.00 For your spouse \$ \$ 0.00 For your spouse \$ \$ 0.00 For your spouse \$ \$ 0.00 Parision or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combart-related injury or disability, or death of a member of the unformed services. If you received any retired pay paid under chapter 61 of the 10, their natural related injury or disability, or death of a mount of related pay to which you would otherwise be entitled if retired under any provision of the 10 other than orbapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act, payments received as a victim of a war crime, a crime against humanity, or international or the second of the second of the second payment of the sources on a separate page and put the total below. \$ 0.00 \$ \$ 0.0		· · · · · · · · · · · · · · · · · · ·			\$	0.00	\$		
Port your spouse S Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. S 924.75 \$				a benefit under	r				
Port your spouse S Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. S 924.75 \$	I	For you	\$	0.00					
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Society Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuty, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay pay and under chapter 61 of that 10th. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Society Act payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annutiry, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Cappy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are not married. Fill in 0 below. 15. You are married and your spouse is filing with you. Fill in 0 below. 16. You are married and your spouse is filing with you. Fill in 0 below. 17. You are married and your spouse is filing with you. 18. Sound to each purpose. If necessary, list additional adjustment does not apply, enter 0 below. 19. You are married and your spouse is filing with you. 10. You are married services. 10. You are married services. 11. Your current monthly income. Subtract line 13 from line 12.	I	For your spouse	\$						
Do not include any benefits received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. \$ 0.00 \$ 0.00 \$ \$ 0.00 \$ 0.00 \$ \$ 0.00 \$ 0.00 \$ \$ 0.00 \$ 0.0	bei not Un dis pay doe	nefit under the Social Security Act tinclude any compensation, pensi ited States Government in connecability, or death of a member of the paid under chapter 61 of title 10, es not exceed the amount of retire	. Also, except as stated in the next on, pay, annuity, or allowance paid ction with a disability, combat-relate e uniformed services. If you receive then include that pay only to the ead pay to which you would otherwise	t sentence, do d by the ed injury or ved any retired extent that it se be entitled		924.75	\$		
Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. Your current monthly income islated in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 15. Calculate your current monthly income. Subtract line 13 from line 12. 16. Calculate your current monthly income for the year. Follow these steps:	Do red doi Un dis	not include any benefits received seived as a victim of a war crime, a mestic terrorism; or compensation ited States Government in connec ability, or death of a member of th	under the Social Security Act; pay a crime against humanity, or intern , pension, pay, annuity, or allowan ation with a disability, combat-relate e uniformed services. If necessary	ments ational or ce paid by the ed injury or)				
Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$ 2,424.75					\$	0.00	\$		
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Sale					\$	0.00	\$		
each column. Then add the total for Column A to the total for Column B. \$ 2,424.75 Total average monthly income 12. Copy your total average monthly income from line 11. \$ 2,424.75 Total average monthly income \$ 2,424.75 Total servage		Total amounts from separat	e pages, if any.	+	\$	0.00	\$		
12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$					2,424.75	+ \$_		Tot	al average
You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$ Total \$ 0.00 Copy here=> 0.00 \$ 2,424.75	12. Co	py your total average monthly in	ncome from line 11.					\$	2,424.75
 You are married and your spouse is filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$	13. Ca	•							
You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	_								
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$ Total \$ 0.00 Copy here=> - 0.00 \$ 2,424.75 15. Calculate your current monthly income for the year. Follow these steps:	_		- ·						
Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$	Ц	Fill in the amount of the income	listed in line 11, Column B, that w						
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. \$ 2,424.75 15. Calculate your current monthly income for the year. Follow these steps:		Below, specify the basis for exc adjustments on a separate page	luding this income and the amount				-		
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. \$ 2,424.75 15. Calculate your current monthly income for the year. Follow these steps:				\$					
Total \$ 0.00 Copy here=> - 0.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps:									
14. Your current monthly income. Subtract line 13 from line 12. \$ 2,424.75 15. Calculate your current monthly income for the year. Follow these steps:									
15. Calculate your current monthly income for the year. Follow these steps:		Total		\$	0.0	00 c	opy here=>		0.00
0.404.75	14. Y	our current monthly income. So	ubtract line 13 from line 12.					\$	2,424.75
			-					\$	2,424.75

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Debtor 1	Jean Audrey Moody	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	_	x 12
15	b. The result is your current monthly income for the year for this par	t of the form\$	29,097.00

Debt	or 1	Jean Audrey Moody	Case no	umber (if known)	
16	. Cal	culate the median family income that applies to	you. Follow these steps:		
	16a	. Fill in the state in which you live.	NC NC		
	16b	. Fill in the number of people in your household.	1		
		Fill in the median family income for your state and			\$ 48,629.00
		To find a list of applicable median income amount instructions for this form. This list may also be available.	s, go online using the link specified in the	he separate	Ψ
17	. Hov	v do the lines compare?	mable at the bankruptcy clerk's office.		
	17a	Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do			
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14.	ulation of Your Disposable Income (
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	y your total average monthly income from line	11	\$	2,424.75
19.	cont	luct the marital adjustment if it applies. If you are tend that calculating the commitment period under use's income, copy the amount from line 13.			
	19a	. If the marital adjustment does not apply, fill in 0 or	ı line 19a.	-\$	0.00
	19b	Subtract line 19a from line 18.			\$
			-		
20.		culate your current monthly income for the year			¢ 2,424.75
	20a				Ψ
		Multiply by 12 (the number of months in a year).			x 12
	20b	. The result is your current monthly income for the	year for this part of the form		\$ 29,097.00
		,	·		
	20c.	. Copy the median family income for your state and	size of household from line 16c		\$48,629.00
	04	How do the lines commerc?			
	21.	How do the lines compare?			
		Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the court, on the top of p	page 1 of this form, check bo	ox 3, The commitment
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered by the court, or	n the top of page 1 of this fo	rm, check box 4, The
Par	t 4:	Sign Below			
	By s	signing here, under penalty of perjury I declare that	the information on this statement and in	n any attachments is true an	d correct.
)	(/s/	Jean Audrey Moody			
	Je	an Audrey Moody gnature of Debtor 1			
	•	e October 18, 2019			
		MM / DD / YYYY			
	-	ou checked 17a, do NOT fill out or file Form 122C-2			
	If yo	ou checked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of that form, copy	your current monthly income	e from line 14 above.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina

In re	Jean Audrey Moody		Case N	0.	
		Debtor(s)	Chapte	13	_
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pa	aid to me, for services rendered or to	
	For legal services, I have agreed to accept		s	5,000.00	
	Prior to the filing of this statement I have received		s	345.00	
	Balance Due		\$	4,655.00	
2. \$	5 310.00 of the filing fee has been paid.				
3. 1	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. l	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are m	embers and associates of my law firm	n.
I	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				
5.]	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankrupto	y case, including:	
b c	Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to redupursuant to 11 USC 522(f)(2)(A) for avoidable.	tement of affairs and plan which cors and confirmation hearing, a uce to market value; exempti	h may be required; nd any adjourned l on planning; prep	nearings thereof;	
7. F	By agreement with the debtor(s), the above-disclosed fe Representation in any dischargeability acti motions to continue or impose the automa property; on applications to incur debt; in a pertaining to more than two matters arising	ions, actions to "strip" mortga tic stay; on motions for relief audits by the Bankruptcy Adn	age liens, or any from stay, on moninistrator; the fili	itions for authority to sell real ng of formal motions or response	s
		CERTIFICATION			_
	certify that the foregoing is a complete statement of arankruptcy proceeding.	ny agreement or arrangement fo	r payment to me fo	or representation of the debtor(s) in	
0	ctober 18, 2019	/s/ Palmer E. Huff	stetler, III		
	ate	Palmer E. Huffste	tler, III 47818		
		Signature of Attorn Sosna Law Office			
		3031 Zebulon Ro	ad		
		Rocky Mount, NC (252) 937-3027		128	
		peh@sosnalaw.co)ZU	
		Name of law firm			

United States Bankruptcy Court Eastern District of North Carolina

		Eastern District of North Caron	IIIa	
n re Jean Audrey Mo	ody		Case No.	
		Debtor(s)	Chapter	13
	VERIFIC	CATION OF CREDITOR	R MATRIX	
ne above-named Debtor	hereby verifies that the	e attached list of creditors is true and	correct to the best	of his/her knowledge.
ate: October 18, 2019		/s/ Jean Audrey Moody		
		Jean Audrey Moody		

Signature of Debtor

Bank of America PO Box 851001 Dallas, TX 75285-1001 Online Information Services, Inc. PO Box 1489 Winterville, NC 28590

Belk PO Box 530940 Atlanta, GA 30353-9041 Optimum Outcomes, Inc. PO Box 58015 Raleigh, NC 27658

Branch Banking & Trust Company ATTN: Mr. Chad Fluno P.O. Box 1847 Wilson, NC 27894-1847 Pitt County Memorial Hospital P. O. Box 8447 Greenville, NC 27835

Cardmember Services PO Box 791278 Baltimore, MD 21279-1278 Suntrust Bank PO Box 791144 Baltimore, MD 21279-1144

First Citizens Bank & Trust Comany 100 East Tryon Road Raleigh, NC 27603

Talbots One Talbot Drive Hingham, MA 02043

Halifax County EMS PO Box 2425 Rocky Mount, NC 27802 UF Health Jacksonville Hospital PO Box 830270 Birmingham, AL 35283-0270

Honda Financial PO Box 1027 Alpharetta, GA 30009-1027 VCU Health PO Box 758721 Baltimore, MD 21275-8721

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Vidant Health PO Box 71095 Charlotte, NC 28272-1095

North Carolina Dept. of Revenue Bankruptcy Section PO Box 1168 Raleigh, NC 27640-1168 Vidant Medical Center PO Box 8447 Greenville, NC 27835-8447

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Rev. 4/2006

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: Jean Audrey Moody Debtor(s). CASE NUMBER:

SCHEDULE C- 2 - PROPERTY CLAIMED AS EXEMPT

I, <u>Jean Audrey Moody</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the Federal bankruptcy law or the laws of a State other than North Carolina, and nonbankruptcy Federal law: *(Attach additional sheets if necessary)*.

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
2016 Honda Accord 37,230 miles Sedan 4D LX I4	Motor vehicle,11 U.S.C. § 522(d)(2)	4,000.00	12,475.00
6673 Ramoth Drive Jacksonville, FL 32226 Duval County	Wildcard (aggregate interest in any property, not to exceed \$1,325 plus up to \$12,575 of unused amount of residency exemption provided under \$522(d)(1)),11 U.S.C. § 522(d)(5)	13,900.00	240,000.00
Clothing	Household goods and furnishings, wearing apparel, appliances, books, animals, crops, or musical instruments (\$625 per item limit),11 U.S.C. § 522(d)(3)	500.00	500.00
Household goods and furnishings, including bedroom furniture, living room furniture, personal effects, kitchen furniture and appliances	Household goods and furnishings, wearing apparel, appliances, books, animals, crops, or musical instruments (\$625 per item limit),11 U.S.C. § 522(d)(3)	1,000.00	1,000.00
Jewelry	Jewelry,11 U.S.C. § 522(d)(4)	100.00	100.00
Miscellaneous electronics	Household goods and furnishings, wearing apparel, appliances, books, animals, crops, or musical instruments (\$625 per item limit),11 U.S.C. § 522(d)(3)	500.00	500.00

I declare that the following are the dates and addresses of my domicile during the 730 days preceding the date of the filing of the bankruptcy petition:

Dates	Addresses
-NONE-	

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I declare that to the extent that any exemptions I have claimed appears on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF INDIVIDUAL TO SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

	ON BEH	HALF OF INDIVIDUAL TO SCHEDULE C - PROPERTY CLAIMED A	3 EXEMPT
		_, declare under penalty of perjury that I have read the foregoing Sch true and correct to the best of my knowledge, information and belief.	
Executed on:	October 18, 2019	/s/ Jean Audrey Moody	
		Jean Audrey Moody	Debtor